

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State OKLAHOMA

COVERAGE AND CONDITIONS OF ELIGIBILITY

Citation(s)

Groups Covered

A. Mandatory Coverage - Categorically Needy and Other
Required Special Groups (Continued)

1902(a)(10)
(A)(i)(V) and
1905(m) of the
Act

10. Individuals other than qualified pregnant women and children under item A.7. above who are members of a family that would be receiving AFDC under section 407 of the Act if the State had not exercised the option under section 407(b)(2)(B)(i) of the Act to limit the number of months for which a family may receive AFDC.

1902(e)(5)
of the Act

11. a. A woman who, while pregnant, was eligible for, applied for, and receives Medicaid under the approved State plan on the day her pregnancy ends. The woman continues to be eligible, as though she were pregnant, for all pregnancy-related and postpartum medical assistance under the plan for a 60-day period (beginning on the last day of her pregnancy) and for any remaining days in the month in which the 60th day falls.

1902(e)(6)
of the Act

b. A pregnant woman who would otherwise lose eligibility because of an increase in income (of the family in which she is a member) during the pregnancy or the postpartum period which extends through the end of the month in which the 60-day period (beginning on the last day of pregnancy) ends.

OK
1-5-98
3-9-98
12-1-97
97-20

Revised 12-01-97

TN No. 97-20
Supersedes 92-02
TN No. 92-02

Approval Date 3-9-98

Effective Date 12-1-97

Revision: HCFA-PM-91-4 (BPD)
AUGUST 1991
State: OKLAHOMA

ATTACHMENT 2.2-A
Page 6
OMB NO.: 0938-

Agency* Citation(s)
Department of Human Services

Groups Covered

A. Mandatory Coverage - Categorically Needy and Other
Required Special Groups (Continued)

42 CFR 435.120

13. Aged, Blind and Disabled Individuals Receiving
Cash Assistance

☒ a. Individuals receiving SSI.

This includes beneficiaries' eligible spouses and persons receiving SSI benefits pending a final determination of blindness or disability or pending disposal of excess resources under an agreement with the Social Security Administration; and beginning January 1, 1981 persons receiving SSI under section 1619(a) of the Act or considered to be receiving SSI under section 1619(b) of the Act.

___ Aged
___ Blind
___ Disabled

*Agency that determines eligibility for coverage.

Revised 10-01-91

TN No. _____
Supersedes _____
TN No. _____

Approval Date **MAR - 3 1992**

Effective Date **OCT - 1 1991**

HCFA ID: 7983E

STATE <i>Oklahoma</i>	A
DATE REC'D JAN 29 1992	
DATE APP'D MAR - 3 1992	
DATE EFF OCT - 1 1991	
HCFA 179 92-82	

Revision: HCFA-PM-95-7 (MB)
October 1995

ATTACHMENT 2.6-A
Page 6a

State: OKLAHOMA

Citation

Condition or Requirement

- X Supplement 2 to ATTACHMENT 2.6-A specifies the resource levels for mandatory and optional categorically needy poverty level related groups, and for medically needy groups.
- X Supplement 7 to ATTACHMENT 2.6-A specifies the income levels for categorically needy aged, blind and disabled persons who are covered under requirements more restrictive than SSI.
- X Supplement 4 to ATTACHMENT 2.6-A specifies the methods for determining income eligibility used by States that have more restrictive methods than SSI, permitted under section 1902(f) of the Act.
- X Supplement 5 to ATTACHMENT 2.6-A specifies the methods for determining resource eligibility used by States that have more restrictive methods than SSI, permitted under section 1902(f) of the Act.
- X Supplement 8a to ATTACHMENT 2.6-A specifies the methods for determining income eligibility used by States that are more liberal than the methods of the cash assistance programs, permitted under section 1902(r)(2) of the Act.
- Supplement 8b to ATTACHMENT 2.6-A specifies the methods for determining resource eligibility used by States that are more liberal than the methods of the cash assistance programs, permitted under section 1902(r)(2) of the Act.

- X Supplement 14 to Attachment 2.6-A specifies income levels used by States for determining eligibility of Tuberculosis-infected individuals whose eligibility is determined under section 1902(z)(1) of the Act.

Revised 12-01-97

TN No. 97-20
Supersedes 95-20 Approval Date 3-9-98 Effective Date 12-1-97
TN No. 95-20

Revision: HCFA-PM-91-4 (BPD)
AUGUST 1991

ATTACHMENT 2.2-A
Page 6b
OMB NO.: 0938-

State: OKLAHOMA

Agency* Citation(s)
Department of Human Services

Groups Covered

A. Mandatory Coverage - Categorically Needy and Other
Required Special Groups (Continued)

1902(a)
(10)(A)
(i)(II)
and 1905
(q) of
the Act

14. Qualified severely impaired blind and disabled individuals under age 65, who--
- a. For the month preceding the first month of eligibility under the requirements of section 1905(q)(2) of the Act, received SSI, a State supplemental payment under section 1616 of the Act or under section 212 of P.L. 93-66 or benefits under section 1619(a) of the Act and were eligible for Medicaid; or
 - b. For the month of June 1987, were considered to be receiving SSI under section 1619(b) of the Act and were eligible for Medicaid. These individuals must--
 - (1) Continue to meet the criteria for blindness or have the disabling physical or mental impairment under which the individual was found to be disabled;
 - (2) Except for earnings, continue to meet all nondisability-related requirements for eligibility for SSI benefits;
 - (3) Have unearned income in amounts that would not cause them to be ineligible for a payment under section 1611(b) of the Act;

*Agency that determines eligibility for coverage.

Revised 10-01-91

TN No. _____
Supersedes _____
TN No. _____

Approval Date MAR - 3 1992

Effective Date OCT - 1 1991

HCFA ID: 7983E

STATE	<u>OKLAHOMA</u>	A
DATE RECD	<u>JAN 29 1992</u>	
DATE APPVD	<u>MAR - 3 1992</u>	
DATE EFF	<u>OCT - 1 1991</u>	
HCFA 179	<u>92-02</u>	

Revision: HCFA-PM-91- 4 (BPD)
AUGUST 1991

ATTACHMENT 2.2-A
Page 6c
OMB NO.: 0938-

State: OKLAHOMA

Agency* Citation(s)
Department of Human Services

Groups Covered

A. Mandatory Coverage - Categorically Needy and Other
Required Special Groups (Continued)

- (4) Be seriously inhibited by the lack of Medicaid coverage in their ability to continue to work or obtain employment; and
- (5) Have earnings that are not sufficient to provide for himself or herself a reasonable equivalent of the Medicaid, SSI (including any Federally administered SSP), or public funded attendant care services that would be available if he or she did have such earnings.

☐ Not applicable with respect to individuals receiving only SSP because the State either does not make SSP payments or does not provide Medicaid to SSP-only recipients.

*Agency that determines eligibility for coverage.

TN No. _____
Supersedes
TN No. _____

Approval Date

MAR - 3 1992

Effective Date

Revised 10-01-91

OCT - 1 1991

HCFA ID: 7983E

STATE	<u>Okahoma</u>	A
DATE REC'D	<u>JAN 29 1992</u>	
DATE APP'D	<u>MAR - 3 1992</u>	
DATE EFF	<u>OCT - 1 1991</u>	
HCFA 179	<u>92-02</u>	

Revision: HCFA-PM-91-4 (BPD)
AUGUST 1991

ATTACHMENT 2.2-A
Page 6d
OMB NO.: 0938-

State: OKLAHOMA

Agency* Citation(s)
Department of Human Services

Groups Covered

A. Mandatory Coverage - Categorically Needy and Other
Required Special Groups (Continued)

1619(b)(3)
of the Act

☒

The State applies more restrictive eligibility requirements for Medicaid than under SSI and under 42 CFR 435.121. Individuals who qualify for benefits under section 1619(a) of the Act or individuals described above who meet the eligibility requirements for SSI benefits under section 1619(b)(1) of the Act and who met the State's more restrictive requirements in the month before the month they qualified for SSI under section 1619(a) or met the requirements of section 1619(b)(1) of the Act are covered. Eligibility for these individuals continues as long as they continue to qualify for benefits under section 1619(a) of the Act or meet the SSI requirements under section 1619(b)(1) of the Act.

*Agency that determines eligibility for coverage.

New 10-01-91

TN No. _____
Supersedes
TN No. _____

Approval Date MAR - 3 1992

Effective Date _____

HCFA ID: 7983E

STATE <u>Okla</u>	A
DATE REC'D <u>JAN 29 1992</u>	
DATE APP'D <u>MAR - 3 1992</u>	
DATE EFF <u>OCT - 1 1991</u>	
HCFA 179 <u>92-02</u>	

State: OKLAHOMA

Agency* Citation(s)
Department of Human Services

Groups Covered

A. Mandatory Coverage - Categorically Needy and Other
Required Special Groups (Continued)

1634(c) of
the Act

15. Except in States that apply more restrictive eligibility requirements for Medicaid than under SSI, blind or disabled individuals who--
- a. Are at least 18 years of age;
 - b. Lose SSI eligibility because they become entitled to OASDI child's benefits under section 202(d) of the Act or an increase in these benefits based on their disability. Medicaid eligibility for these individuals continues for as long as they would be eligible for SSI, absent their OASDI eligibility.
 - ☒ c. The State applies more restrictive eligibility requirements than those under SSI, and part or all of the amount of the OASDI benefit that caused SSI/SSP ineligibility and subsequent increases are deducted when determining the amount of countable income for categorically needy eligibility.
 - ☐ d. The State applies more restrictive requirements than those under SSI, and none of the OASDI benefit is deducted in determining the amount of countable income for categorically needy eligibility.

42 CFR 435.122

16. Except in States that apply more restrictive eligibility requirements for Medicaid than under SSI, individuals who are ineligible for SSI or optional State supplements (if the agency provides Medicaid under §435.230), because of requirements that do not apply under title XIX of the Act.

42 CFR 435.130

17. Individuals receiving mandatory State supplements.

*Agency that determines eligibility for coverage.

New 10-01-91

TN No. _____
Supersedes
TN No. _____

Approval Date

MAR - 3 1992

Effective Date

HCFA ID: 7983E

STATE	<u>OKlahoma</u>	A
DATE REC'D	<u>JAN 29 1992</u>	
DATE APPV'D	<u>MAR - 3 1992</u>	
DATE EFF	<u>OCT - 1 1991</u>	
HCFA 179	<u>92-02</u>	

Revision: HCFA-PM-91-4 (BPD)
AUGUST 1991

ATTACHMENT 2.2-A
Page 6f
OMB NO.: 0938-

State: OKLAHOMA

Agency* Citation(s)
Department of Human Services

Groups Covered

A. Mandatory Coverage - Categorically Needy and Other
Required Special Groups (Continued)

- 42 CFR 435.131 18. Individuals who in December 1973 were eligible for Medicaid as an essential spouse and who have continued, as spouse, to live with and be essential to the well-being of a recipient of cash assistance. The recipient with whom the essential spouse is living continues to meet the December 1973 eligibility requirements of the State's approved plan for OAA, AB, APTD, or AABD and the spouse continues to meet the December 1973 requirements for having his or her needs included in computing the cash payment.

☒ In December 1973, Medicaid coverage of the essential spouse was limited to the following group(s):

☒ Aged ☒ Blind ☒ Disabled

☐ Not applicable. In December 1973, the essential spouse was not eligible for Medicaid.

*Agency that determines eligibility for coverage.

New 10-01-91

TN No. _____
Supersedes _____
TN No. _____

Approval Date MAR - 3 1992

Effective Date _____

HCFA ID: 7983E

STATE	<u>Oklahoma</u>	A
DATE REC'D	<u>JAN 29 1992</u>	
DATE APP'D	<u>MAR - 3 1992</u>	
DATE EFF	<u>OCT - 1 1991</u>	
HCFA 177	<u>92-02</u>	

Revision: HCFA-PM-91-4 (BPD)
AUGUST 1991

ATTACHMENT 2.2-A
Page 6g
OMB NO.: 0938-

State: OKLAHOMA

Agency* Citation(s)
Department of Human Services

Groups Covered

A. Mandatory Coverage - Categorically Needy and Other
Required Special Groups (Continued)

- 42 CFR 435.132 19. Institutionalized individuals who were eligible for Medicaid in December 1973 as inpatients of title XIX medical institutions or residents of title XIX intermediate care facilities, if, for each consecutive month after December 1973, they--
- a. Continue to meet the December 1973 Medicaid State plan eligibility requirements; and
 - b. Remain institutionalized; and
 - c. Continue to need institutional care.
- 42 CFR 435.133 20. Blind and disabled individuals who--
- a. Meet all current requirements for Medicaid eligibility except the blindness or disability criteria; and
 - b. Were eligible for Medicaid in December 1973 as blind or disabled; and
 - c. For each consecutive month after December 1973 continue to meet December 1973 eligibility criteria.

*Agency that determines eligibility for coverage.

TN No. _____ Approval Date MAR - 3 1992 Effective Date New 10-01-91
Supersedes _____
TN No. _____ HCFA ID: 7983E

STATE	<u>Okla-homa</u>	A
DATE REC'D	<u>JAN 29 1992</u>	
DATE APP'D	<u>MAR - 3 1992</u>	
DATE EFF	<u>OCT - 1 1991</u>	
HCFA 179	<u>92-02</u>	

Revision: HCFA-PM-91-4 (BPD)
AUGUST 1991

ATTACHMENT 2.2-A
Page 7
OMB NO.: 0938-

State: OKLAHOMA

Agency* Citation(s)
Department of Human Services

Groups Covered

A. Mandatory Coverage - Categorically Needy and Other
Required Special Groups (Continued)

42 CFR 435.134

21. Individuals who would be SSI/SSP eligible except for the increase in OASDI benefits under Pub. L. 92-336 (July 1, 1972), who were entitled to OASDI in August 1972, and who were receiving cash assistance in August 1972.

☒ Includes persons who would have been eligible for cash assistance but had not applied in August 1972 (this group was included in this State's August 1972 plan).

☒ Includes persons who would have been eligible for cash assistance in August 1972 if not in a medical institution or intermediate care facility (this group was included in this State's August 1972 plan).

☐ Not applicable with respect to intermediate care facilities; the State did or does not cover this service.

*Agency that determines eligibility for coverage.

Revised 10-01-91

TN No. _____
Supersedes
TN No. _____

Approval Date MAR - 3 1992

Effective Date _____

HCFA ID: 7983E

STATE	<u>OKLAHOMA</u>	A
DATE REC'D	<u>JAN 29 1992</u>	
DATE APP'D	<u>MAR - 3 1992</u>	
DATE EFF	<u>OCT - 1 1991</u>	
HCFA 179	<u>92-02</u>	